

State of California--Health and Welfare Agency  
Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

17927

Department of Health Services  
Toxic Substances Control Division  
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law
3. Generator's Name and Mailing Address		Q AD 07 17 01 22 013			A. State Manifest Document Number: 86544198
Silicon General 11861 Western Ave, Garden Grove, CA 92641					
4. Generator's Phone (714) 898-8121					
5. Transporter 1 Company Name		6. US EPA ID Number			D. State Transporter's ID: 803755
Omega Recovery Services		C AD 10 12 24 51 00 1			E. Transporter's Phone: 213/698-0991
7. Transporter 2 Company Name		8. US EPA ID Number			F. State Transporter's ID:
					G. State Transporter's Phone:
9. Designated Facility Name and Site Address		10. US EPA ID Number			H. Facility's Phone: 213/698-0991
Omega Recovery Services 12504 E. Whittier Blvd. Whittier, Ca 90602		ICA ID 10 12 24 51 00 1			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. Waste Corrosive Liquid NOS UN 1760 (Micro Strip) Corrosive Material		002	DM	1110	
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
		01			
15. Special Handling Instructions and Additional Information					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.					
Printed/Typed Name		Signature		Month Day Year	
Hiep Nguyen		[Signature]		11/11/87	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature		Month Day Year	
Printed/Typed Name		[Signature]		11/12/87	
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Month Day Year	
Printed/Typed Name		[Signature]		11/12/87	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name		Signature		Month Day Year	
FRANK FORD		[Signature]		11/12/87	

86544198

DHS 8022 A (11/85)  
(EPA 8700-22)

While: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS  
To: P O Box 3000, Sacramento CA 95812

07-12-71 0009-24-14